

MEMORANDUM OF AGREEMENT
BETWEEN
DEPARTMENT OF CHILDREN AND FAMILIES
AND
THE DEPARTMENT OF MENTAL HEALTH AND ADDICTION
SERVICES
NEXT STEP INITIATIVE
SUPPORTIVE HOUSING SERVICES FOR YOUNG ADULTS

This Agreement is made between the Connecticut Department of Children and Families (hereinafter referred to as "DCF"), acting by and through its Commissioner and the Department of Mental Health and Addiction Services (hereinafter referred to as "DMHAS"), acting by and through its Commissioner.

WHEREAS, DCF is committed to enhancing support services to young adults who are between the ages of 18 and 23 years, who were formerly or are involved with DCF, and who are homeless or at risk of homelessness (hereinafter referred to as "clients"); and

WHEREAS, DCF will fund case management services for a maximum of twenty-five (25) clients who are selected to participate in the DMHAS/CHFA supportive housing program; and

WHEREAS, DMHAS will provide transitional housing and contracted services to the clients; and

WHEREAS, DCF is authorized to enter into this Agreement pursuant to Conn. Gen. Stat. §17a-3 of the General Statutes of Connecticut; and

WHEREAS, DMHAS is authorized to enter into this Agreement pursuant to §17a-451, of the General Statutes of Connecticut;

Now therefore, DCF and DMHAS agree:

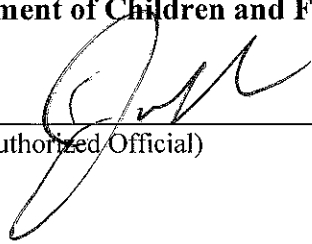
1. This Agreement shall be in effect beginning July 1, 2011 and shall terminate on June 30, 2014, unless modified or terminated as provided elsewhere in this Agreement. Either party may terminate this Agreement by providing ninety (90) days' written notice to the other party.
2. DCF shall provide funding to DMHAS, up to **\$175,000**, each year over the course of three fiscal years, beginning July 1, 2011, to cover the costs of contracted case

management services for a maximum of twenty five (25) clients. Funding provided shall be based on a rate of \$7,000 per year per client served.

3. DCF and DMHAS shall jointly develop program eligibility criteria, which shall include but not be limited to, the requirement that "client" is defined as a young adult between the ages of eighteen (18) and twenty three (23) years who was committed to DCF as abused, neglected, uncared for or delinquent or who was receiving DCF Voluntary Services as of his or her sixteenth (16th) birthday.
4. DCF and DMHAS shall jointly select all clients for this program to ensure that all eligibility criteria are met.
5. DCF and DMHAS shall jointly approve the contracted case management agency's individual plan of services for each client to assist with maintaining supportive housing, which plan shall include training regarding living expenses, educational services, employment retention, health care services, nutrition and meal planning, shopping, housework and promoting safe and stable family relationships.
6. Each client may receive the services set forth in his or her individual plan for a one-year period. DCF and DMHAS may approve an additional one-year period, if requested by the client and if the client continues to meet the eligibility criteria.
7. DMHAS shall implement performance-monitoring guidelines which may include, but will not be limited to, Tenant Satisfaction Surveys, Client Outcomes and Performance Monitoring for Supportive Housing.
8. Upon the effective date of this Agreement, DMHAS shall assume responsibility for the procurement of a case management agency for the provision of services to clients, as well as the subsequent contract management
9. After June 30, 2014, DCF will no longer provide funding for this program, including funding for any clients currently in the program, unless additional funds are appropriated by the Connecticut General Assembly for this purpose and unless this Agreement is renewed. However, after June 30, 2014, clients shall continue to receive those services from DMHAS that are customarily provided by DMHAS to its clients as long as the clients continue to be eligible for and participate in such services.
10. Amendments to this Agreement may be requested by either party and approved through a formal amendment to this Agreement.

ACCEPTANCES AND APPROVALS:

By Department of Children and Families:



Signature (Authorized Official)

8/5/11

Date

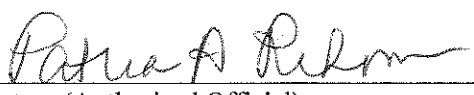
Joette Katz

(Typed Name of Authorized Official)

Commissioner

Title

By Department of Mental Health and Addiction Services:



Signature (Authorized Official)

8/10/11

Date

Patricia Rehmer

(Typed Name of Authorized Official)

Commissioner

Title